

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12TH, SUITE 1A
 DES MOINES, IA 50319
 Fax: (515)281-4073
 www.iowa.gov/ethics

Reset Form

FORM-GBG

Gift, Bequest, or Grant information received by a department or accepted by the Governor on behalf of the state

For office use only

Indexed _____
 Audited _____
 Checked _____
 Computer _____

Iowa Code section 8.7 requires all gifts, bequests, and grants given to any department of the state of Iowa or received by the Governor on behalf of the state be reported to the Iowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is required to be filed within 20 days of receipt of the gift, bequest, or grant.

DEPARTMENT OR OFFICE RECEIVING THE GIFT, BEQUEST, OR GRANT:

Child Advocacy Board	
Name of Department or Office 220 N Washington Avenue	Mason City, IA 50401
Mailing Address 566-295-5262	City, State, Zip Code
Area Code & Telephone No.	

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Jim Hennessey	
Name Lucas Building, 4th Floor 321 E 12th Street	Des Moines, IA 50319-0083
Mailing Address (if different from above) jim.hennessey@dia.iowa.gov	City, State, Zip (if different from above) 515-242-6392
Email Address	Area Code & Telephone Number (if different from above)

DONOR OF GIFT, BEQUEST, OR GRANT:

Friends of Iowa CASA and ICFCRB	
Name Lucas Building, 4th Floor 321 E 12th Street	Des Moines, IA 50319-0083
Mailing Address 515-281-7299	City, State, Zip Code
Area Code & Telephone Number	
shierri.ripperger@dia.iowa.gov	
Email Address (optional)	

1/9/19	\$ 74.10
Date of Gift, Bequest, or Grant	Amount/Value*
*value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".	

Provide a description of the gift, bequest, or grant and purpose thereof:

Mileage for Katie Greving, CASA Assistant, to/from CASA appreciation events

Criteria to use this form:

Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state.

Statement of Affirmation:

I, Crystal Engstrom affirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the donor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.

Crystal Engstrom
 Signature

1/10/19

Date